



June 1, 2026

Re: Proposed WakeMed-Atrium Merger  
*Submitted via email*

Dear Members of the Wake County Board of Commissioners,

[United States of Care](#) is a listening-first, nonpartisan health care policy and advocacy organization that brings people's experiences to the decisions that shape our health care system. Our mission is to ensure that everyone has access to quality, affordable health care, regardless of who they are, where they live, or how much money they make.

**We are reaching out today regarding the proposed merger of WakeMed with Atrium Health.** Drawing on our national experience working on healthcare affordability and access—including our engagement in [similar transactions](#) in other states — we strongly encourage the Board to fully weigh the health and financial impacts before making a decision. Should the transaction move forward, we encourage you to place conditions on the transaction that will protect patients and families for years to come.

### **Protecting Affordability for North Carolina Patients and Families**

The research is clear: when hospitals consolidate, they gain negotiating leverage that leads to [higher prices](#), [less choice](#), and [restricted access](#) for patients — often with [no improvement](#) in health outcomes. North Carolinians are already suffering from high health care prices. [Seventy-four percent](#) of North Carolina voters report **having skipped or delayed care because of cost**, and [our polling](#) shows they are ready for their elected officials to ensure that transactions like this one improve health care for patients — not just the bottom line of mega-systems.

This transaction would greatly expand Atrium Health's network, which is already the nation's [third-largest nonprofit](#) health system.

*To protect Wake County patients and employers, we encourage the Board to seek clear answers on the following concerns:*

- What specific, enforceable price protections will be written into the agreement to prevent cost increases for patients? Can Atrium & WakeMed commit to holding costs flat for several years or at most, limiting any cost increases to CPI inflation?

- How will the combined entity's contracting strategies with insurers be structured to ensure that patients are not steered away from lower-cost alternatives or subject to higher cost-sharing as a result of Atrium's expanded statewide presence?
- What monitoring and reporting mechanisms will allow the Board and the public to assess the transaction's impact on healthcare prices in Wake County over time?

For example, we encourage the Board to consider questioning WakeMed and Atrium leadership about pursuing additional conditions like those placed in Indiana as part of the Union Health-Terre Haute [merger](#), which established [enforceable price protections](#), including a site-neutrality provision prohibiting the combined entity from reclassifying off-campus clinics as hospital facilities without prior approval. Our [recent analysis](#) shows that North Carolina patients are already facing approximately \$120M in excess charges due to facility fees.

### **Preserving Access to Essential and Safety Net Services for North Carolinians**

Any transaction affecting WakeMed's operations should include strong, binding protections to ensure continued access to critical low-access communities.

*We encourage the Board to seek written commitments on:*

- Preserving essential services, such as including the Level I Trauma Center, Pediatric ICU, obstetrics, psychiatric care, and pediatric services for uninsured and Medicaid patients at current locations and volumes, and for a specified timeframe into the future.
- Expanding mental health capacity given the well-documented shortage of inpatient psychiatric beds in Wake County.
- Exploring how charity care standards will be maintained and whether the combined entity will take responsibility for proactively identifying and enrolling eligible patients in financial assistance, rather than placing that burden on individuals to navigate on their own.
- Maintaining community benefit programs. [Research](#) indicates that consolidated tax-exempt hospitals decrease their spending on charity care, compared to unmerged hospitals. As a condition of this transaction, the combined entity should be required to meet a minimum spending amount for community benefits, equal to or higher than the current level of community benefit provided, and should consider an emphasis on community benefit spending in the areas identified in the hospital's most recent [community health needs](#) assessments.

For example, we'd also encourage the Board to consider questioning WakeMed and Atrium about pursuing conditions like those outlined in Connecticut's [Hartford HealthCare-Prospect](#) merger requiring maintenance of services.

### **Clarifying Governance and Accountability**

We encourage the Board to seek clear answers on how local governance and accountability will be preserved in practice, including:

- What decisions remain under WakeMed's local authority?

- What meaningful recourse does the County retain if commitments are not met?
- How will community representation hold up as WakeMed becomes more deeply integrated into the broader Advocate Health enterprise over time?
- Specifically, what decisions are the responsibility of the WakeMed Board versus Atrium?
- Will Atrium be able to replace WakeMed board members at will, or will that appointing authority rest with the County?

We are grateful for the care you are bringing to this review and your commitment to this matter on behalf of Wake County patients and families. Please do not hesitate to reach out if you have any questions or if we can support your process further.

Sincerely,

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